



Chapter Two: Identification and Assignments of Military Personnel with Exceptional Family Members

For Department of Defense schools overseas to provide free appropriate education for each child with an educational disability, the military departments must manage overseas assignments of active duty personnel with EFMs. The Department of Defense Dependent Schools (DoDDS), the school system that educates military children outside the United States, has long provided special education services. But with worldwide responsibility for the education of military children with special needs, DoDDS cannot meet all possible special education needs in every school. Cooperation between DoDDS and each branch of Service is necessary to ensure sponsors with EFMs are assigned to locations where both DoDDS and military medical departments have pre-established programs and staff to meet the needs of these children. This chapter details DoD policies for overseas assignments of sponsors of EFMs and how the Army, Navy, Marine Corps, and Air Force have implemented their special needs programs.

2.1 DoD Policy

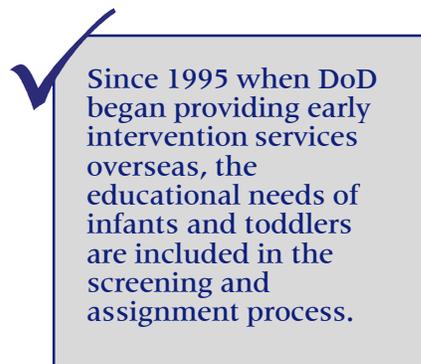
The DoD Instructions cited in the previous chapter establish the following policies related to accompanied overseas tours of service members with EFMs.

- Children with disabilities who are eligible to attend DoDDS on a space-required basis are entitled to receive special education and related services.
- Infants and toddlers with conditions likely to result in developmental delay and who, but for their age, would be eligible to attend DoDDS on a space-required basis are entitled to early intervention services.
- Sponsors of children with disabilities may not be adversely affected by denying them career-enhancing overseas duty assignments, and they will receive the same consideration for family travel to an overseas location as sponsors without a disabled family member.
- The Military Departments may not deny command-sponsored family travel on the basis of a lack of special education resources including related services.
- Failure by the Military Departments to assign sponsors with disabled children to pinpoint locations where DoDDS and the Military Departments have pre-positioned early intervention or special education resources is never cause for denying access to their full educational entitlements.

✓ The Military Departments may not deny command-sponsored family travel on the basis of a lack of special education resources including related services.

2.1.1 Assignment Process for Sponsors with EFMs

DoD published DoD 1010.13-R “Overseas Assignment of Sponsors who have Children with Disabilities who are Space-Required Students in the Department of Defense Dependents Schools” to establish procedures for pinpoint assignments. It establishes procedures in the assignment process for both medical and personnel functions of Military Departments and DODDS. Since 1995 when DoD began providing early intervention services overseas, the educational needs of infants and toddlers are included in the screening and assignment process.



Screening and evaluation: Preschool and school-age family members of sponsors nominated for assignment overseas to areas where family members are authorized must be screened within 12 months before their report date to the overseas duty location. When screening identifies a child who may require special education, a complete evaluation including medical, developmental, psychological and educational assessments or a review of recent evaluations must be completed. Information gathered from primary care physicians, current educational records and evaluations must be reviewed by a designated medical authority who recommends the services the child will most likely require. Medical and educational information and the recommendations must be transferred through appropriate channels to the service member’s assignments branch before the service member can be authorized to travel at government expense on a command-sponsored tour.

Assignments: Sponsors of children with disabilities may be assigned to overseas locations provided there is (first) a valid requirement for their occupational specialty and grade and (second) an assignment location with the specific special education and medically related services likely to be needed. A pinpoint assignment may then be made to a location that meets both criteria. A final assignment selection is made after coordination with points of contact for the responsible DoDDS region and the Military Medical Department providing medically related services.

Service members for whom there is no suitable overseas assignment match can be removed from overseas orders provided there will be no adverse impact on their careers or the military mission.

Note: The Services are not required to make pinpoint assignments based on educational needs to stateside installations with Department of Defense Elementary and Secondary Schools (DDESS). DDESS provides a full continuum of services just as state and local school systems do.

2.1.2 Pre-established Programs in Overseas Military Communities

In coordination with DoDDS, the Military Medical Departments have located early intervention services at locations where DoDDS has special education resources. Each Military Medical Department provides Educational and Developmental Intervention Services (EDIS) to support early intervention and related services in its assigned area of geographic responsibility. DoDDS uses staffing clusters in designated schools to serve children with specific disabilities. A directory of pre-established programs in overseas communities is available to assignment managers to make pinpoint assignments of sponsors with EFMs. The directory is published by the DoD Educational Activity and may be downloaded from the special education page on its website: www.dodea.edu/instruction/curriculum/special_ed.

Community categories: The directory assigns communities to one of four categories:

- small and/or isolated communities with no pre-established special education programs
- small communities where children require less than 50% of services from a special educator and minimal early intervention or medically related services
- communities with pre-established school and EDIS programs that serve children who require up to 80% of the services from special education and EDIS providers
- communities with pre-established school and EDIS programs that can serve children who require up to 100% of their services from special education and EDIS providers

Communities for severely impaired EFMs: In addition to placing overseas military communities into one of the four categories above, the directory also identifies specific communities that have specialized services for children with more severe or low-incidence disabilities. They include severe hearing impairment/deafness, severe visual impairment/blindness, severe learning impairment/mental retardation, autism/pervasive developmental disorder, or serious emotional impairment requiring a specialized environment.

2.1.3 Areas of Responsibility for Military Medical Departments

DoD has assigned areas of responsibility to Army, Navy and Air Force medical departments for early intervention and medically related services overseas. Each branch has pre-established EDIS programs to serve geographic areas generally corresponding to installations where it also provides medical care. Where more than one Service is concentrated (e.g., Okinawa, Landstuhl area), only one has EDIS responsibility. Military personnel activities will normally assign sponsors with EFMs only to locations within the Service's area of responsibility. For sponsors who require an overseas assignment outside of the assigning Service's area of responsibility, DoD 1010.13-R provides guidance for coordination between military departments. DoD also provides standardized forms for documenting special needs, which the Services use to enroll service members in their programs. The following forms are at Appendix C and also available online:



Military personnel activities will normally assign sponsors with EFMs only to locations within the Service's area of responsibility.

- DD 2792 Exceptional Family Member Medical Summary www.dior.whs.mil/forms/DD2792.PDF
- DD 2792-1 Exceptional Family Member Special Education/Early Intervention Summary www.dior.whs.mil/forms/DD2792-1.PDF

2.1.4 Overseas Assignment of Civilian Employees with EFMs

Civilian employees of DoD components who are selected for overseas positions are entitled to education for their children in DoDDS schools, including special education and related services. Employees are selected on the basis of merit and not the educational needs of their children. Without a process to match civilians with EFMs to job locations with the appropriate services, selectees may only be given comprehensive information about educational and medical resources in the location of the position offered so they can make informed decisions. Upon accepting a position overseas, civilians whose children will be entitled to attend a DoDDS school on a space-required basis must be screened through a questionnaire or interview administered by their civilian personnel office. They will be asked to provide medical and educational information if screening reveals a possible disability. This information will be forwarded to the DoDDS point of contact. When it becomes clear that a civilian has accepted a position in a location that lacks adequate resources for

his or her child with a disability, an alternative position of equal pay and career enhancement may be offered. But employees must never be pressured to decline an offer because educational services are not available. Instead, DoD will provide services stipulated in an IEP regardless of cost.

2.2 Overview of Army Procedures

The Army Exceptional Family Member Program (EFMP) is a coordinated effort to

- identify and document the educational and medical needs of EFMs and consider the needs in the assignment process
- ensure soldiers are assigned to areas where special needs can be accommodated
- provide early intervention and medically related services in designated overseas locations
- provide information and support to Army families with special needs regardless of their assignment location

The Army EFMP requires enrollment of EFM sponsors who are active duty soldiers, Army reservists in the Active Guard Reserve program or on active duty for more than 30 days, and Army National Guard personnel activated under Title 10, US Code. Army EFMs are defined as family members with any physical, emotional, developmental, or intellectual disorder that requires special treatment, therapy, education, training, or counseling. Guidance for the Army EFMP is found in Army Regulation 608-75, 20 Dec 04, “Exceptional Family Member Program” www.usapa.army.mil/pdffiles/r608_75.pdf.



Army EFMs are defined as family members with any physical, emotional, developmental, or intellectual disorder that requires special treatment, therapy, education, training, or counseling.

2.2.1 Screening

Screening for enrollment in the Army EFMP may occur during routine health care or be requested at anytime. However, screening is a requirement for family members of soldiers on assignment instructions to overseas areas for which command sponsorship/family member travel is authorized, and the soldier elects to serve an accompanied tour. Screening also is required when an accompanied sponsor is reassigned from one overseas location to another or requests command sponsorship when he/she is already overseas serving an unaccompanied tour. The screening process includes the following steps:

1. Soldier obtains authenticated Family Member Deployment Screening Sheet (DA Form 5888) from personnel service battalion.
2. Soldier or spouse contacts EFMP case coordinator at nearest Army military treatment facility (MTF). The coordinator will schedule a screening appointment at the MTF, or assist the family to have screening conducted at another DoD MTF or with a civilian physician if the soldier's family is more than 60 miles from an MTF.
3. Soldier or spouse obtains EFMP Screening Questionnaire (DA Form 7246) from MTF EFMP office or from the web at www.usapa.army.mil and completes the form for the family prior to face-to-face screening.
4. Member of the EFMP staff reviews medical records of all family members, arranges for a physical and developmental screening for children 72 months of age and younger if necessary, and completes the medical portion of DA Form 5888.
5. If screening identifies possible special medical needs, a physician (usually the family member's primary care manager) completes DD Form 2792. If there is an educational concern, the sponsor or spouse will be asked to have the staff at the child's school or early intervention program complete DD 2792-1 and attach a copy of the child's individualized family service plan or individualized education program.
6. Soldier returns completed DA Form 5888 with copies of DD Forms 2792 and 2792-1, if applicable, to the personnel service battalion.
7. Personnel service battalion forwards forms to overseas travel approval authority and requests command sponsorship/ family member travel.
8. As appropriate, the overseas travel approval authority coordinates with DoDDS and medical point-of-contact to determine availability of required services and provides decision to personnel service battalion within 30 days.

Soldiers who enroll in the EFMP after receipt of OCONUS assignment instructions need to be aware that enrollment may not affect that assignment. If general medical care is not available, the soldier may be required to serve an "all others" tour.

2.2.2 Enrollment Process

Each Army MTF has an EFMP case coordinator who initiates enrollment when a special need is identified through routine healthcare or screening for overseas assignment. The coordinator assists the family in arranging necessary evaluations and ensures DD 2792 and DD 2792-1 are completed by a physician or authorized medical practitioner and properly signed. School personnel may complete the DD Form 2792-1 and attach a copy of the individualized education plan (IEP). Copies are then forwarded to one of the EFMP medical coding teams located at an Army Regional

Medical Center. These multidisciplinary coding teams review the medical and educational information and needs and enter the data into an automated EFMP database on the Army Personnel Network. Each soldier is advised of enrollment by being given a computer-generated EFMP summary of the enrollment data. If necessary, EFMP case coordinators meet with soldiers and families to explain the summary and answer questions. They also assist soldiers in updating their enrollment every three years, as required, or whenever new circumstances warrant.

Note: Army Reserve and National Guard commands maintain separate databases for EFMP enrollment. Instead of entering enrollment data into the Army EFMP program, the DD 2792 and DD 2792-1 for family members of Army Reserve and Army National Guard soldiers are forwarded to the appropriate EFMP point of contact for the component. When Army EFMs are identified at a Navy or Air Force MTF, enrollment can be initiated by forwarding DD 2792 and DD 2792-1 to the nearest Army MTF EFMP office.

2.2.3 Assignment Considerations

Army assignment managers are required to consider special needs and assign soldiers with EFMs to areas where needs can be met whenever possible. However, assignment decisions are based on valid personnel requirements for a soldier's grade and occupational specialty, and all soldiers enrolled in EFMP must remain eligible for unaccompanied assignments worldwide. The assignment process for EFMP enrollees follows these steps:

1. Assignment managers for Active Army, Army Reserves and Army National Guard identify enrolled soldiers being considered for assignment.
2. EFMP coordinators at the Army Human Resources Command (AHRC) and Army Reserve and National Guard personnel commands query special needs advisors at MTFs in prospective assignment locations about availability of medical-care resource requirements identified on the EFMP summary/ DD Form 2792.
3. If assignment is overseas, personnel commands query the overseas commands about the availability of medical and/or educational resources in the communities where the soldier may be assigned. For active duty, the information on needs is maintained in the EFMP database, for Guard and Reserve, the DD 2792 and 2792-1 is used. Both the DoDDS point of contact for Europe or the Pacific and the medical point of contact for Europe, the Pacific or Korea are included in the coordination.

4. DoDDS and medical points of contact collaborate and within 30 days provide recommendations for overseas communities that can meet the needs of the EFM.
5. Assignment managers consider medical and DoDDS recommendations before completing assignment process.

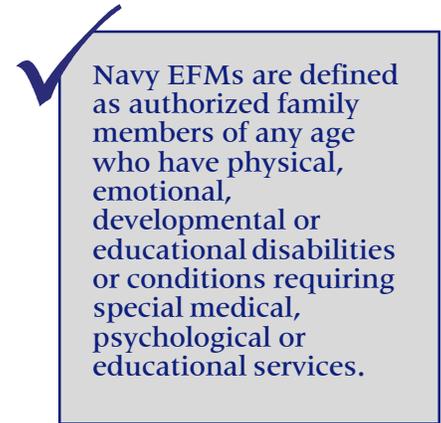
2.2.4 Sources of Information about Army EFMP

Each Army installation has an EFMP manager located at the Army Community Service (ACS) Center. The EFMP manager provides information, support and advocacy to soldiers and their families with EFMs and should be the primary source of assistance at the installation. Most installation ACS websites have EFMP information, and the Army offers these additional online information sources:

- www.armycommunityservice.org/vacs_efm is the Army's official EFMP website. It provides information about enrollment, answers frequently-asked questions, and provides links to related websites. This site offers a video that reviews EFMP enrollment requirements and shows case examples of enrollment benefits as well as consequences of not enrolling that apply to all Services.
- www.armyedis.com provides information on early intervention and medically related services in support of the Individuals with Disabilities Education Act and identifies EDIS clinic locations.

2.3 Overview of Navy Procedures

The Navy's EFMP ensures that special needs are met through mandatory enrollment and pinpoint assignments to locations where necessary resources are available. Navy EFMs are defined as authorized family members of any age who have physical, emotional, developmental or educational disabilities or conditions requiring special medical, psychological, or educational services. Navy EFMP guidance may be found in



- SECNAV Instruction 1754.5A, 08 May 02, “Exceptional Family Member Program” http://neds.daps.dla.mil/Directives/1754_5a.pdf
- BUMED Instruction 1300.2, 17 Feb 00, “Medical, Dental, and Educational Suitability Screening and Exceptional Family Member Program Enrollment” w/Change Transmittal 1, 8 Aug 00 <http://navymedicine.med.navy.mil/Files/Media/directives/1300-2%20with%20ch-1.pdf>
- OPNAV Instruction 1300.14C, 10 Jan 01, “Suitability Screening for Overseas and Remote Duty Assignment” http://neds.daps.dla.mil/Directives/1300_14c.pdf
- OPNAV Instruction 1754.2B, 16 Jun 03, “Exceptional Family Member Program” http://neds.daps.dla.mil/Directives/1754_2b.pdf

2.3.1 Screening

The Navy's Suitability Screening Program determines the suitability of all Navy and Marine Corps service and family members for overseas or remote duty assignments. It also addresses the suitability of service members for operational (sea duty) requirements. Commanding officers must ensure sailors, marines and their family members are screened within 30 days of receipt of transfer orders. Steps in the screening process include

1. Service member receives orders, completes screening worksheet (NAVMED 1300.2) for self and each family member, and schedules medical, dental and educational screening with Navy medical treatment facility (MTF) and dental treatment facility (DTF).
2. Medical/dental providers conduct screening, complete NAVMED 1300/1 for each individual, and identify special needs, if any.

3. If special needs are identified, EFMP coordinator initiates enrollment, and suitability screening coordinator requests suitability determination from gaining MTF.
4. Losing MTF makes suitability recommendation and transferring command makes final suitability determination.

Suitability screening and EFMP enrollment may proceed concurrently, but screening must be completed before the sponsor reports to the new duty location. Sponsors with EFMs who were not enrolled in the EFMP before receiving orders may not be authorized command-sponsored travel of family members if the gaining MTF determines that general medical services required by any family member are not available.

2.3.2 Enrollment Process

Enrollment in the Navy EFMP is required immediately upon identification of a special need. DD 2792 and DD 2792-1 forms are used to enroll sailors in the EFMP and are available from personnel service activities, EFMP coordinators, command points of contact or the Web (see section 2.1.3 above). Sailors may take the form to the nearest MTF to be completed, or a civilian provider may complete the medical summary if the sailor is not stationed within an area served by an MTF. The EFMP coordinator at the MTF reviews enrollment forms for consistency and completeness and forwards the application to one of three central screening committees (CSC).

- The CSC at the Naval Medical Center Portsmouth, Virginia evaluates applications from sailors whose EFMs reside east of the Mississippi or in Europe, Africa, and Atlantic/Caribbean Region.
- The CSC at Naval Medical Center San Diego, California evaluates applications from sailors whose EFMs reside west of the Mississippi including Alaska and Central America.
- The CSC at Naval Hospital Yokosuka, Japan evaluates applications from sailors whose EFMs reside in the Pacific basin, Asia or Hawaii.

The CSC, which is a multidisciplinary committee of health care providers, reviews the enrollment forms. If it approves enrollment, an assignment category is recommended and the application is forwarded to the Navy Personnel Command (PERS-662F) in Millington, Tennessee. The Navy's EFMP manager reports enrollment to officer and enlisted detailers, annotates sponsors' personnel records, maintains an EFMP database, and monitors assignments of all program enrollees.

Enrollees must update enrollment information every three years, at least nine months prior to receiving orders and/or with a change of status of an EFM.

Note: Army and Air Force MTFs may initiate enrollment when they identify a Navy or Marine Corps EFM by forwarding the DD 2792 and DD 2792-1 to the appropriate CSC using the criteria above. CSC contact information is in Appendix B.

2.3.3 Assignment Considerations

The Navy considers special needs in all assignments of sailors enrolled in the EFMP. It gives maximum consideration to co-locating sponsors with their families and makes overseas assignments only to locations where services for EFM are available. However, enrollment in EFMP does not limit any sailor's availability for worldwide assignment or the requirement to serve unaccompanied tours to fulfill sea/shore obligations of rate/rating. To facilitate matching assignments to needs, the Navy has six enrollment categories:

- Category I – no special assignment considerations other than monitoring by NAVPERSCOM
- Category II – pinpoint assignment to location with required services overseas or within the continental United States (CONUS)
- Category III – no accompanied overseas assignments
- Category IV – assignment near a major medical area (military or civilian) in CONUS
- Category V – homestead assignment (homestead assignments do not preclude requirements for sea/shore rotations of the sponsor or sponsor-elected unaccompanied/geographical bachelor assignments)
- Category VI – temporary enrollment from 6-12 months for treatment/diagnostic assessment followed by updated category designation

2.3.4 Sources of Information about Navy EFMP

Sailors and their family members seeking information about the Navy EFMP should be referred to the EFMP coordinator at the nearest MTF or to the EFMP page on the Naval Personnel Command's website, www.npc.navy.mil/CommandSupport/ExceptionalFamilyMember. This page has links to the [Children with Special Needs Navy Parent Handbook](#) a page for sailors to verify their enrollment status, and frequently-asked questions. Fleet and Family Support Centers at each Navy installation and the Lifelines Services Network www.lifelines.navy.mil/ also provide information on EFMP and special needs resources in military and civilian communities.

2.4 Overview of Marine Corps Procedures

The Marine Corps requires all personnel with an EFM to enroll in its EFMP regardless of the EFM's age or eligibility for DoDDS. The primary purpose of the EFMP is to ensure that all special needs can be met at a new assignment location. The Marine Corps defines special needs as requiring any special medical, dental, mental health, developmental or educational needs, wheelchair accessibility, adaptive equipment or assistive technology devices and services. EFMP guidance is contained in



The Marine Corps defines special needs as requiring any special medical, dental, mental health, developmental or educational needs, wheelchair accessibility, adaptive equipment or assistive technology devices and services.

- SECNAV Instruction 1754.5A, 08 May 02, "Exceptional Family Member Program" http://neds.daps.dla.mil/Directives/1754_5a.pdf
- BUMED Instruction 1300.2, 17 Feb 00, "Medical, Dental, and Educational Suitability Screening and Exceptional Family Member Program Enrollment" w/Change Transmittal 1, 8 Aug 00 <http://navymedicine.med.navy.mil/Files/Media/directives/1300-2%20with%20ch-1.pdf>
- OPNAV Instruction 1300.14C, 10 Jan 01, "Suitability Screening for Overseas and Remote Duty Assignment" http://neds.daps.dla.mil/Directives/1300_14c.pdf
- Marine Corps Order 1754.4A, 10 Apr 97, "Exceptional Family Member Program"

2.4.1 Screening

The Marine Corps identifies the special needs of its families through self-reporting and during routine healthcare or suitability screening for overseas assignments. Suitability screening of all marines and their family members is the responsibility of the Navy's Medical Department, and procedures are the same as section 2.3.1 above.

2.4.2 Enrollment Process

Enrollment in the Marine Corps EFMP is required immediately upon identification of a special need. DD 2792 and DD 2792-1 are used to enroll Marines in the EFMP. As soon as a special need is identified, Marines and their EFMs will be referred to the installation EFMP coordinator at the Marine and Family Service Center who assists them in completing DD 2792 and DD 2792-1. The EFMP coordinator signs and forwards completed forms to the appropriate Navy CSC identified in 2.3.2 above. The CSC reviews marine sponsor enrollment forms, recommends enrollment categories, and forwards application packages to the Marine Corps EFMP manager at

Headquarters, USMC in Quantico, Virginia. The EFMP manager reviews the CSC's category recommendation and the sponsors' DD 2792 and enters enrollment data into an EFMP database. Via the database, USMC military occupational specialty (MOS) monitors are able to identify only the enrollment category and they work closely with the EFMP manager when enrolled marines are pending transfer orders. Enrollees must update enrollment information every three years, at least nine months prior to receiving orders and/or with the change of status of an EFM.

2.4.3 Assignment Considerations

The Marine Corps considers EFM needs in making all assignments of marines enrolled in the EFMP, regardless of the location. Accompanied assignments overseas will be authorized when the special needs of the family member can be met. Enrollment in EFMP will not limit a marine's availability for overseas deployments or unaccompanied tours to locations where family travel is not authorized. To facilitate assignment decisions, the Marine Corps uses four enrollment categories as guidelines:

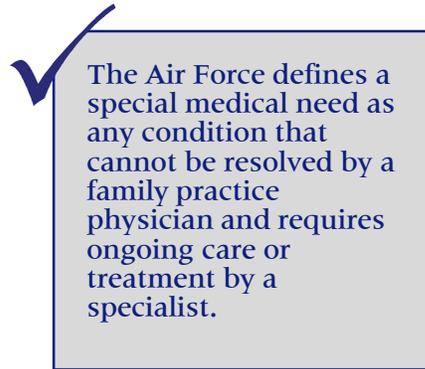
- Category I – EFM has no limitations on assignment locations
- Category II – EFM may accompany service member to pinpoint assignment overseas or within the United States
- Category III – EFM may not accompany service member on overseas assignments
- Category IV – EFM requires pinpoint assignments only to major medical areas in the United States

2.4.4 Sources of Information about Marine Corps EFMP

Marines and their family members seeking information about the Marine Corps EFMP should be referred to their installation EFMP coordinator or to the EFMP page on the Marine Corps Community Services website www.usmc-mccs.org/efmp/. This page has links to EFMP information resources including a downloadable brochure with frequently-asked questions and answers.

2.5 Overview of Air Force Procedures

The Air Force Special Needs Identification and Assignment Coordination (SNIAC) process identifies family members with special medical and/or educational needs for reassignment purposes. SNIAC is a mandatory enrollment process that ensures the availability of medical and educational services required for sponsors' EFM's prior to reassignment. The Air Force defines a special medical need as any condition that cannot be resolved by a family practice physician and requires ongoing care or treatment by a specialist. Even if a patient is not currently receiving treatment but has a physical or emotional condition that may require medical care, he/she is considered to have a special need. Children with special educational needs are those from 3-21 whose schools have them on an individualized education program (IEP), those from 0-3 years who have an individualized family service plan (IFSP), or those who are being evaluated for special education, related services, or early intervention services. A new Air Force instruction (AFI) on special needs and educational and developmental intervention services is being developed following the separation of the special needs/family member relocation clearance process from the Family Advocacy Program. Interim policy letters and the AFI (when published) may be found on the Air Force Special Needs site www.afspecialneeds.org.



2.5.1 Screening

Family Member Relocation Clearance (FMRC) is a mandatory process that the Air Force uses to screen all family members traveling overseas with their sponsors, as well as those family members with previously identified special medical and educational needs who are relocating within the continental United States (CONUS). The FMRC process follows these steps:

1. Airman receives assignment notification and obtains FMRC paperwork during initial appointment with military personnel flight (MPF) for outbound assignments.
2. At least six months prior to travel, airman completes AF Form 146600 (Request for Family Member's Medical and Education Clearance for Travel) and AF Form 1466D0 (Dental Health Summary) for each family member over age 2 who has not had a dental check up in the past year or has unresolved dental needs.

3. Airman coordinates completion of DD 2792-1 by school/early intervention staff for each child with an IEP/IFSP.
4. Airman coordinates completion of DD 2792 and appropriate addenda by medical care provider for each child with a special medical condition.
5. FMRC coordinator at MTF meets with airman to review and help complete forms, schedules joint screening interview, and gathers medical records for all family members.
6. Airman and all family members have joint screening appointment at MTF with special needs coordinator (SNC) and medical review officer (only EFM required to attend if assignment is in CONUS).
7. If special needs are identified, FMRC coordinator sends facility determination inquiry (FDI) to gaining MTF for determination (in coordination with DoDDS, if overseas).
8. If needs can be met, FDI is returned within two weeks and assignment processing continues; if needs cannot be met at overseas assignment location, FDI is forwarded to the gaining MAJCOM Behavioral Health Consultant to find an alternate assignment.
9. For EFMs not recommended for travel to a CONUS location, the FDI is returned to the FMRC coordinator who notifies the SNC and sponsor and forwards documentation to the MPF.

2.5.2 Enrollment Process

Enrollment in the SNIAC process is mandatory. Airmen are required to initiate enrollment at their MTF as soon as special needs are known without waiting for the FMRC process. Information on the DD 2792 and DD 2792-1 is used by the SNC in consultation with the medical reviewer to make enrollment decisions. Enrollment criteria is provided by the Air Force Medical Support Agency and based on DoD guidance. For a service member to become enrolled in the SNIAC, the SNC must

- initiate an assignment limitation code “Q” (by forwarding an authorization letter to the Air Force Personnel Center (AFPC) via the MPF)
- open a “special needs assignment coordination record” at the MTF
- enter identifying information into an electronic log, “Q-Base.”

To initiate enrollment of an Air Force family from another Service's MTF, DD 2792 and DD 2792-1 should be completed and forwarded to the SNC at the Air Force MTF where the sponsor is assigned or to the nearest Air Force MTF.

Special needs screener: A special needs screener placed in the cover of the service member's medical record at inprocessing is used to alert the SNC at the gaining MTF of a new Q-coded sponsor. The SNC ensures assignment coordination record is transferred in.

Enrollment updates: The Air Force does not code specific disabilities or require service members to update their enrollment status. Instead, special needs are re-evaluated each time a service member receives reassignment notification. At these times, and also during routine health care, removal of the Q-Code and closure of the assignment coordination record may be initiated if the criteria for special needs is no longer present.

2.5.3 Assignment Considerations

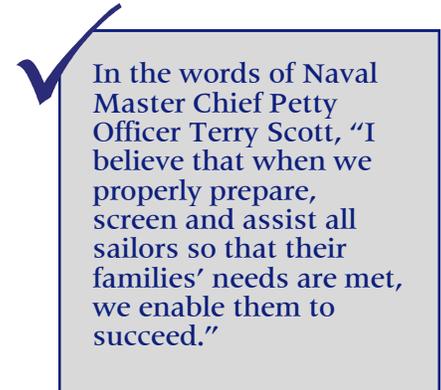
The Air Force will authorize family travel for a Q-coded airman to any location overseas where the MTF, in coordination with DoDDS, indicates that medical and/or educational needs can be met. Reassignments within CONUS are based on the gaining MTF's assurance that medical needs can be met. Airmen with EFMs are not exempt from unaccompanied assignments to remote locations and must remain worldwide deployable. Families whose sponsor takes an unaccompanied remote assignment with a follow-on assignment must be screened prior to the remote assignment and again within six months prior to traveling to the follow-on assignment. Air Force assignment options are sometimes limited by the service member's occupational specialty. Airmen in this situation will often change specialties in order to better support the needs of their families.

2.5.4 Sources of Information about Air Force SNIAC

Air Force families seeking information about SNIAC should be referred first to the Air Force special needs website www.afspecialneeds.org. For questions and concerns not addressed there, they may be referred to the special needs coordinator at the nearest Air Force MTF.

2.6 Identification and Assignment Challenges

The sections above clearly demonstrate the complexities involved in matching special needs to assignment locations capable of meeting needs. Each of the Services invests significant resources and an impressive degree of inter-agency collaboration to make its identification and assignment processes work. And military leaders generally support programs when they recognize that considering the special needs of service members makes them more, not less, able to accomplish the mission. In the words of Naval Master Chief Petty Officer Terry Scott, “I believe that when we properly prepare, screen and assist all sailors so that their families’ needs are met, we enable them to succeed.” Yet each Service continues to face challenges in successfully identifying and assigning service members with EFMs. This section details a few of the issues shared by military leaders and special needs program managers in each of the Services.



2.6.1 Reluctance to Enroll

Many service members continue to perceive enrollment in their Service’s special needs program as negative despite ongoing efforts to educate all personnel about programs and dispel myths. Service member distrust of programs is usually based on one or more of the following misperceptions:

- Enrollment will force the service member into assignments that will hinder career advancement.
- Enrollment will be a factor considered in promotion decisions and/or reenlistment approval.
- Enrollment will limit opportunities for accompanied overseas assignments.

All of the information sources identified above for each Service, as well as mandatory unit education programs and installation awareness campaigns, attempt to correct these misperceptions. When suspicions about enrollment are encountered, the service member should be informed that avoiding enrollment will be even more detrimental to his/her career because it will create avoidable problems such as cancellation or modification of orders, early return of family members from overseas, and possible disciplinary action.

Note: Service members may use concerns about privacy of personal information as a reason to avoid enrollment. They should be advised that information obtained through evaluating, coding, and enrolling EFM sponsors is safeguarded and disclosed according to each Service's privacy program. Detailers, assignment managers, selection boards and the service member's chain of command do not have access to the information upon which enrollment is based.



Detailers, assignment managers, selection boards and the service member's chain of command do not have access to the information upon which enrollment is based.

2.6.2 Misperceptions about Benefits of Enrollment

In contrast to distrust of enrollment in a special needs program, some service members have unrealistic expectations about the benefits of enrollment, believing that it will

- permit them to select their duty stations
- make them ineligible for deployment or unaccompanied tours of duty
- give them priority for housing
- allow them to serve in a permanent location

Professionals who provide services and support to families with EFMs should be able to explain that enrollment only entitles a service member to have his family's special needs considered during the assignment process. It does not limit a service member's military duty obligations. When a service member with a severely disabled EFM is allowed to "homestead," it is only to an area where the needs of the Service and the EFM can both be met and does not preclude unaccompanied tours or deployments.

2.6.3 Reassignments, Deferments, Deletions and Early Returns

When special needs become known in a location where needed services are not readily available or when an assignment could cause undue hardship for a special needs family, service members may have options ranging from early return of their family members from overseas locations to humanitarian/compassionate reassignment, deferment or deletion of assignment orders. Each Service has similar policies that require the service member to request the action in accordance with military personnel procedures and support it with appropriate professional documentation. Requests are generally considered on a case-by-case basis after other

means to resolve problems have been exhausted. When requests are based on special needs, enrollment in the Service's EFM/special needs program is required immediately. However, enrollment is not, by itself, a valid reason for service members to request humanitarian actions.

2.6.4 Reserve and National Guard Enrollment

Service members in the Reserve Components (RC) are eligible and in some cases required to enroll in their Service's special needs program. Identifying Reserve Component EFMs is a challenge because they are not routinely screened for overseas assignments. Service members are normally entitled to program benefits only while on active duty for more than 30 days; thus, they frequently do not receive adequate information about special needs programs and fail to recognize any benefit in enrolling. When appropriate, RC service members should be advised that not enrolling could affect their eligibility for TRICARE special needs benefits through its Extended Health Care Option (ECHO), which requires enrollment. All RC personnel being mobilized for active duty should understand and weigh the benefits of TRICARE versus a civilian health care option. It is especially important for those with EFMs.

2.6.5 Operational Readiness

Service members enrolled in an EFMP receive special consideration for assignments, but they do not receive special consideration for their personal and family readiness for deployment/mobilization. Most special needs families know that the extended absence of a primary caregiver requires careful planning and preparation. In addition to making sure their EFMP enrollment status is current and they have the required wills and powers of attorney (addressed during deployment processing), service members should be encouraged to consider the following safeguards:

Family care plan: Normally required for single and dual military parents, a family care plan is a good idea for all special needs families in case the EFM's primary caregiver needs assistance or becomes unable to provide care.

Letter of intent: A letter of intent is a set of instructions describing every detail of an EFMs care. It can be given to an alternate caregiver so the parent has some assurance that care and/or parenting practices will continue without interruption. A letter of intent should be highly recommended for single and dual military parents with EFMs and encouraged for any special needs family, especially those with difficult or unusual care issues. More information on letters of intent is in Chapter 5.

